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		Data Marrel 1 0000								
W		Date: <u>March 1, 2002</u> Docket No.: <u>0941-0421P-SP</u>								
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Ż	Assi	Date: March 1, 2002 Docket No.: 0941-0421P-SP Assistant Commissioner for Patents								
	DOX	BOX PAIENT APPLICATION								
		Washington, D.C. 20231								
	Sir:	Sir.								
H	oir.	DII.								
	Tran	Transmitted herewith for filing is the patent application of								
		ntor(s): SUN, Hung-Ming								
F	Inve	ntor(s): SUN, Hung-Ming								
		•								
	For:	METHOD OF CORRECTING AN IMAGE WITH PERSPECTIVE DISTORTION								
		AND PRODUCING AN ARTIFICIAL IMAGE WITH PERSPECTIVE								
		DISTORTION								
	Enclosed are:									
		osca arc.								
	<u>X</u>	$\overline{\mathrm{X}}$ A specification consisting of 23 pages								
	<u>X</u>	6 sheet(s) of FORMAL drawings								
	Х	An assignment of the invention - \$40.00 Recording Fee								
		abbigiment of the invention - \$40.00 Recording Fee								
		Certified copy of Priority Document(s)								
	<u>X</u>	Executed Declaration Original X Photocopy								
	<u>X</u>	Applicant claims small entity status in accordance with 37 CFR 1.27								
		Application Data Sheet in accordance with 37 C.F.R. 1.76								

-	Prelimin	_ Preliminary Amendment									
Information Disclosure Statement, PTO-1449 and reference(s)											
Other											
Applicant requests early publication											
-	The filing fe	ee has been o	calculated a	as showr	n below:						
		LARGE	ENTITY		SMALL ENTITY						
In The Line Line And And The The Line Line Line Line	FOR	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE			
	BASIC FEE	******** ********	*****		\$740.00	or	**** ****	\$370.00			
	TOTAL CLAIMS	8 - 20 =	0	x18 =\$	0.00	or	x 9 = \$	0.00			
	INDEPENDENT	3 - 3 =	0	x84 =\$	0.00	or	x 42 = \$	0.00			
	MULTIPLE DE CLAIM PRESE	+280 =	\$ 0.00	or	+140 = \$	0 , 00					
The Marie			5	rotal \$	0.00		TOTAL \$	370:00			
-	X A checksin the amount of \$\frac{410.00}{2}\$ to cover the filing fee and recording fee (if applicable) is enclosed.										
-	Please charge Deposit Account No. 02-2448 in the amount of \$ A triplicate copy of this transmittal form is enclosed.										
No fee is enclosed.											

Please send correspondence to:

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Falls Church, VA 22040-0747 Telephone: (703) 205-8000 If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. 1.16 or under 37 C.F.R. 1.17; particularly, extension of time fees.

Respectfully submitted,

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